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SERIAL NUMBER 10/518,199	FILING OR 371(c) DATE 08/09/2005 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 80350-1350
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APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/FR03/01863 06/18/2003

**** FOREIGN APPLICATIONS *******

FRANCE 02/07698 06/18/2002

**** SMALL ENTITY ****

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

24504

TITLE

Composite prosthetic implant

FILING FEE RECEIVED 565	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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